given in recruitment to the sons/dependents of ex-Servicemen.

5. Complaints regarding corruption at the recruitment centres are received by the Government and these are mostly anonymous or psuedonymous based on rumours or made by unsucessful candidates. All such complaints are investigated thoroughly and necessary action is taken against the defaulters, if any.

[English]

CGHS Dispensaries

- 4642. DR. ARVIND SHARMA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:
- (a) whether the Central Government are running any CGHS Dispensary for the beneficiaries of Central Government employees, who are coming from Delhi border cities like Sonepat and Bahadurgarh;
 - (b) if not, the reasons therefor;
- (c) whether there is any proposal under Government's consideration to start CGHS dispensaries in those areas; and
 - (d) if so, the time by which it is likely to be started?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) to (d) Due to infrastructural constraints, CGHS is being expanded in phases. The first priority is to cover all State capitals having a concentration of 7,500 or more Central Government employees/pensioners.

Financial Assistance for Hospitals etc. to Kerala

4643. SHRI MULLAPPALLY RAMACHANDRAN:

SHRI KODIKUNNIL SURESH:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the details about the loan/financial assistance given to hospital projects in Kerala during the last three years;
- (b) the terms/conditions subject to which allocation has been made:
- (c) whether the Government have received any further request from Kerala for getting financial assistance for the expansion and development of medical colleges and hospitals in the State;
 - (d) if so, the details thereof; and
 - (e) the action taken by the Government thereon?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) and (b) 'Health' being the State Subject, the State Governments are primarily responsible for providing hospital facilities within their available resources. No financial assistance has been given by the Central Government for expansion of hospitals.

(c) to (e) The Government of Kerala offered land free of cost for the setting up of National Dental Research Institute though no detailed project proposal has been prepared by that Government. They had sought financial assistance for the scheme from the European Commission.

Medicinal Herbs

- 4644. SHRI KRISHAN LAL SHARMA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:
- (a) names of the herbs of medicinal values on which research is going on in various drugs research institutes all over the country as well as in foreign countries;
 - (b) the facts and achievements thereof;
- (c) whether the Government propose to have a well coordinated approach in this matter with research institutions in foreign countries to avoid duplication; and
 - (d) if so, the measures taken in this regard?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) and (b) Drug research on medicinal plants is carried on through various research projects under several departments of the Government, and databases on medicinal plants are maintained with CSIR, ICAR etc. in India and NAPRALERT of Chicago, among International databases. Under the Traditional Medicine Research Programme of the Indian Council of Medical Research, the major achievements have been the scientific validation of an ancient technique called Ksharaasootre for the management of fistula-in-and, through multicentric controlled clinical trials. The product is ready for technology transferred to suitable pharmaceutical industry. The other areas where encouraging results are obtained are (i) Viral hepatitis, (ii) Diabetes mellitus, bronchial asthma, Urolithiasis, filariasis, Kala-azar, wound healing etc. The lists of the plants undergoing clinical trials/experimental studies is given in the enclosed Statement.

(c) and (d) The research efforts involve networking of Institutes of ICMR and CSIR for advanced pharmacological Research and also for establishing Quality Control and Standardisation of herbal remedies identified for clinical/experimental studies, Biostatistical monitoring of all clinical trials on herbal remedies, and the different medical colleges/hospitals in the country where clinical trials are undertaken, thus minimising the possibility of duplication in research work. There is no foreign collaboration under the Traditional Medicine Research Programme of ICMR.